## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10006049-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

the specification of which is attached hereto unless the following box is checked:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

as US Application Serial No. or PCT International Application

DISABLING	TOOL	EXECUTION	VIA ROLES

( ) was filed on

		material to pateritabili	ty as defined in 37 CF		he duty t		
oreign Application(s) and/							
hereby claim foreign prio	rity benefits below and	under Title 35, United Stat have also identified below a on which priority is claimed	ny foreign application for pa	any foreign application(s) atent or inventor(s) certif	for patent of icate having		
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C 119			
N/A				YES: NO			
				YES: NO			
Provisional Application				Ct-toinional applic	otion(e) lie		
I hereby claim the benefit below:	under Title	35, United States Code See	ction 119(e) of any United	States provisional applic	ation(s) iis		
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	itional or PCT international filing date of		STATUS (patented/pending/abandoned)				
APPLICATION SERIAL NU	PPLICATION SERIAL NUMBER FILING DATE		STATUS (patented/pending/abandoned)				
N/A							
business in the Patent and	nereby appo Trademark ( er Number	int the following attorney(s Office connected therewith: 022879	Place Customer Number Bar Code Label here	ecute this application an	d transact		
Send Correspondence	to:		Direct Telephone	Calls To:			
HEWLETT-PACKARD	COMPANY		T. Grant Ritz				
Intellectual Property A P.O. Box 272400	aministration	ļ.	1. Grant Ritz				
			/970\ 898-0697				
Fort Collins, Colorado	80527-240	0	(970) 898-0697				
Fort Collins, Colorado  I hereby declare that made on information the knowledge that or both under Section	t all stater and belie willful fals	ments made herein of if are believed to be tru e statements and the of Title 18 of the Unite the application or any p	my own knowledge a ue; and further that th like so made are puni d States Code and th	ese statements were shable by fine or im	e made v prisonme		
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DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION (continued)

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Residence:	Same as Residence			
Post Office Address:	Same as Residence			
		Date		
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Inventor's Signature		Date		
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Inventor's Signature		Date		
			014	. IIe
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Inventor's Signature		Date		
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			_	
Residence:				
Post Office Address:				
Inventor's Signature		Date		